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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/076,552	02/19/2002	Joshua Charles Harrison	1793		
75	90 06/28/2004		EXAMINER		
Joshua C. Harrison 22091 Wood Island Lane			BOTTORFF, CHRISTOPHER		
	each, CA 92646		ART UNIT	PAPER NUMBER	
· ·			3618		
			DATE MAILED: 06/28/200	DATE MAILED: 06/28/2004	

Please find below and/or attached an Office communication concerning this application or proceeding.

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	Application No.	Applicant(s)	Applicant(s)	
Interview Summary	10/076,552	HARRISON, JOSHUA CHARLES		
	Examiner	Art Unit		
	Christopher Bottorff	3618		
All participants (applicant, applicant's representative, P1	O personnel):			
(1) Christopher Bottorff, Patent Examiner.	(3)			
(2) <u>Joshua Harrison, Applicant</u> .	(4)			
Date of Interview: 22 June 2004.				
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2)□ applicant's representa	tive]		
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.			
Claim(s) discussed: <u>1</u> .				
Identification of prior art discussed: <u>Schnitzhofer</u> .				
Agreement with respect to the claims f) was reached.	g)⊠ was not reached. h)□] N/A.		
Substance of Interview including description of the gene reached, or any other comments: <u>Proposed amendment structure and arrangement of the claimed firm features.</u> contain new issues requiring further search or consideration.	ts to claim 1 were discussed the Mr. Bottorff noted that such a	hat involved further in amendment would	limiting the	
(A fuller description, if necessary, and a copy of the ame allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach	copy of the amendments that	agreed would rendent at would render the o	er the claims claims	
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, CONTENT OF ILE A STATEMEN SUMMARY OF RECORD OF Interview requirements on reverse	the last Office action has alrea DR THE MAILING DATE OF T IT OF THE SUBSTANCE OF	ady been filed, APPI HIS INTERVIEW SI	LICANT IS	

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required